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Account#: 120000000088

Date:01/	09/2019	
Name: Ma	arisa Kugelmann	
Reference #:	1034735	
Entity Name:	OASIS OUTSOU	RCING HOLDINGS, INC.
Articles of	Incorporation/Authorizatio	n to Transact Business
☐ Amendme	ent	
Change o	f Agent	
Reinstater	ment	
Conversio	'n	
Merger		
☐ Dissolutio	n/Withdrawal	
Fictitious I	Name	
Other		

Authorized Amou	unt:\$35.00)
Signature: \(\sum_{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\tint{\text{\text{\text{\tint{\text{\text{\text{\text{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\text{\text{\text{\tetx{\text{\text{\tint{\text{\tinit{\text{\text{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texiext{\texi}\text{\text{\text{\texi}\text{\text{\texit{\ti}\tint{\text{\text{\text{\text{\texit{\texi}\text{\text{\texit{\texi}\tint{\text{\texi}\tinithtet{\text{\texi{\text{\texi	aux fal	
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F: 800.944.6607

P: +852.2682.9633

F: •852.2682.9790

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporati	617.0502, 607.1508, or 617.1508, F on organized under the laws of the S or registered agent, or both, in the S	rate of Florida
I. The name of t	he corporation: OASIS O	UTSOURCING HOLDING	SS, INC.
	office address:	_	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification:01/14	1/1997 Document number:	97000003948
	I street address of the current reg tment of State: (If resigned, ente	nistered agent and registered office or er resigned)	n tile with the
	MAYO	TTE, TERRY	
	2054 VISTA I	PARKWAY STE 300	2019.
	WEST PALM	BEACH, FL 33411	OI NYF 6102
6. The name and (if changed):	I street address of the new registe	ered agent (if changed) and /or regist	
	COGENCY GLOE	BAL INC.	0: 52
	115 North Calhou		
	Tallahassee, FL	Box NOT acceptable 32301	
The street addre	ess of its registered office and the identical.	ne street address of the business offi	ce of its registered agent.
		adopted by its board of directors of been notified in writing of the chan	
/s/ To	erry Mayotte	Terry Mayotte	CFO and Secretary
I further agrée (performance of agent. Or, if thi	to comply with the provisions of my duties, and I am familiar wi is document is being filed merel	igent and agree to act in this capact all statutes relative to the proper a th and accept the obligation of my ply to reflect a change in the register totified in writing of this change.	ity. iid complete position as registered
/s/_Ti	m Mayville	1/9/2019	
	half of an entity:	Date	

Tim Mayville, Assistant Secretary Typed or Printed Name

* * * FILING FEE: \$35.00 * * *